PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10717033

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			16		(00.0		1	RATE	FEE) [RATE	FEE	
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			(minus 20=		* 0			X\$ 9=		OR	X\$18=	0	
INDEPENDENT CLAIMS			(minus 3 =		* 0			X43=		OR	X86=	0	
MU	ILTIPLE DEPEN	IDENT CLAIM P	RESENT					+145=		OR	+290=	0	
* If	the difference	in column 1 is	less than ze	ero, enter	"0" in c	olumn 2	1	TOTAL		OR	TOTAL	770	
CLAIMS AS AMENDED - PART II								SMALL E	NTITV	OR	OTHER SMALL		
		(Column 1) CLAIMS	· · · · · ·	(Colur I HIGH		(Column 3)	۱ ا	SWALL			OMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		<u> </u>	1 1	X43=		OR	X86=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						j	+145=		OR	+290=		
							i	TOTAL		OR	TOTAL ADDIT, FEE		
		(Calumn 1)		(Colu	mn 2)	(Column 3)		ADDIT. FEE		.m	ADDIT. FEE		
		(Column 1) CLAIMS		HIGH	IEST	Column	۱ ۱		ADDI-	l		ADDI-	
ENT B		REMAINING AFTER AMENDMENT		NUM PREVI PAID		PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=	4	X43=		OR	X86=		
_	FIRST PRESE	NTATION OF MI	JLTIPLE DEI	PENDEN	CLAIM		」 │	. 1 45			+290=		
								+145=		OR	TOTAL		
								TOTAL ADDIT. FEE		OR	ADDIT. FEE		
		(Column 1)		(Colu		(Column 3	<u>)</u>						
ENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=]	X\$ 9=		OR	X\$18=		
۱ME	Independent	*	Minus	***		<u>] </u>	4	X43=		OR	X86=		
<u> </u>	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN'	T CLAIM		ן נ	+145=	-	OR	+290=		
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								,	OR	TOTAL		
***	If the "Highest Nu	mber Previously Pa mber Previously Pa ber Previously Pa	aid For" IN TH	IS SPACE	is less tha	an 3. enter "3."		ADDIT. FEE	oropriate bo		ADDIT. FEE olumn 1.	·	